

Aggregate Reports for Tuberculosis Program Evaluation

Follow-up and Treatment for Contacts of Tuberculosis Cases

Case Name: _____

Case Manager: _____

Date of original diagnosis (started medications): _____

Check one: ☐ Sputum smear positive ☐ Sputum smear negative/culture positive ☐ Other

Part A Contacts

1a. Number of Contacts: Contacts that met the following criteria:

- i) the local health dept (LHD) believed the person was exposed to TB, warranting an evaluation;
- ii) enough identifying information was available to enable contacting the person.

1b. Number of Expanded Contacts: "Contacts" that the LHD was compelled to evaluate, even if these individuals were probably not exposed to the index case of TB under investigation. Do not include these individuals in the table below; data about any LTBI treatment can be reported in the Monthly TB Activity Report.

Complete the following table for the contacts identified in #1a above:

2. Evaluated: Contacts that were tested and examined as part of the contact investigation (CI). Count contacts only after the final tuberculin skin test (TST) has been read and, if positive, until ATBD has been excluded. DO count contacts with TB disease or LTBI <i>already diagnosed before the CI</i> in this category, but do not include these cases in the ATBD/LTBI case count below. If these previously-diagnosed contacts were treated for LTBI, the data about treatment can be recorded in the Monthly TB Activity Report.	
3. Active TB Disease: Only include cases <i>initially discovered</i> as part of the CI. Do <u>not</u> include: (a) ATBD that developed after LTBI was diagnosed during the CI; (b) old TB cases already treated or spontaneously healed; (c) ATBD discovered coincidentally (not because of the CI).	
4. Latent TB Infection: Contacts with LTBI diagnosed because of the current CI. Do not include LTBI that were diagnosed coincidentally or previous to the CI.	
5. Started Treatment:* Count contacts with LTBI in this category after the first dose of a planned full treatment course for LTBI is taken. <u>Note re: window-period treatment:</u> Do not count contacts receiving treatment pending a second TST in this category unless LTBI is finally diagnosed and counted for the report.	

*** LIST CONTACTS WHO STARTED LTBI MEDICATION ON THE BACK OF THIS FORM**

Part A Contacts - continued

List the contacts who started LTBI treatment. Specify the treatment outcomes for the contacts in the table in Part B below.

Part B LTBI Treatment Outcomes:

A. Completed Treatment: The following criteria are required for counting under this category: <ol style="list-style-type: none"> 1) the prescribing provider, believing that an adequate regimen had been received, discontinued treatment; 2) the contact had taken at least 80% of the prescribed doses in the selected regimen; 3) the treatment was finished within a period of 150% of the selected duration of therapy. 	
B. Reasons Treatment Not Completed:	
1. Death: Contacts who were receiving treatment on schedule but died before completion of treatment.	
2. Contact Moved (Follow-up unknown): Contacts who did not complete treatment because they moved and follow-up information was unavailable. However, if the LHD received specific follow-up information from another jurisdiction, the contact's outcome should be reclassified accordingly.	
3. Active TB Developed: Contacts receiving treatment for LTBI who developed ATBD. However, if the treatment regimen had been stopped <i>before</i> active TB developed, because of completion or any other reason, do not change the outcome to this category.	
4. Adverse Effect of Medicine: Contacts who did not complete treatment because of an adverse effect (including drug or drug-food interactions) of the anti-TB medication if a health care provider documents the problem and determines that the medicine should be discontinued.	
5. Contact Chose to Stop: Contacts who decided to stop taking their medicine before they had finished their regimen, and a health care provider had not determined that the medicine should be discontinued for a medical reason.	
6. Contact Lost to Follow-up: Contacts whose treatment status at the anticipated end of the treatment regimen was incomplete or indeterminate because the HD could not locate them to determine a more specific outcome.	
7. Provider Decision: A health care provider determined that the treatment for LTBI should be stopped because of concerns about the benefits, safety, or practicality of treatment, eg a contact had such erratic attendance at the clinic that the adequacy and safety of the treatment could not be monitored.	